

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M-G		12/20/99
O.I.P.E. CLASSIFIER		16	010300
FORMALITY REVIEW	UNM0	08231	1-20-99
RESPONSE FORMALITY REVIEW	UNM0	08231	3-14-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date	Claim	Date	Claim	Date
Final		Original	5 14 25 6 16 26 FEB 19 AUG 19 MAR 19 01 01 02 02 03 03	Final	
Original	5 14 25 6 16 26 FEB 19 AUG 19 MAR 19 01 01 02 02 03 03	Original	5 14 25 6 16 26 FEB 19 AUG 19 MAR 19 01 01 02 02 03 03	Original	
1	- X X X X	51	- ✓ ✓ ✓ ✓ ✓	101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57	- N X X X X	107	
8		58		108	
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27		77		127	
28		78		128	
29		79		129	
30	X X X X	80		130	
31	✓ ✓ ✓ ✓	81		131	
32		82		132	
33		83		133	
34		84		134	
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39		89		139	
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42		92		142	
43		93		143	
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46		96		146	
47		97		147	
48		98		148	
49		99		149	
50	- ✓ ✓ ✓ ✓	100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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